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Bib Data Sheet

SERIAL NUMBER 09/525,446	FILING DATE 03/14/2000 RULE	CLASS 370	GROUP ART UNIT 2749	ATTORNEY DOCKET NO. K-090C
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APPLICANTS

Young-Joon Song, Kyongki-Do, KOREA, REPUBLIC OF;

**** CONTINUING DATA *******

THIS APPLICATION IS A CIP OF 09/373,703 08/13/1999
 WHICH IS A CIP OF 09/376,373 08/18/1999
 WHICH IS A CIP OF 09/525,444 03/14/2000
 WHICH IS A CIP OF 09/525,448 03/14/2000
 WHICH IS A CIP OF 09/525,447 03/14/2000
 WHICH CLAIMS BENEFIT OF 60/136,763 05/28/1999

**** FOREIGN APPLICATIONS *******

REPUBLIC OF KOREA 8630/1999 03/15/1999
 REPUBLIC OF KOREA 12857/1999 04/12/1999
 REPUBLIC OF KOREA 12856/1999 04/12/1999
 REPUBLIC OF KOREA 15722/1999 04/30/1999
 REPUBLIC OF KOREA 19506/1999 05/28/1999
 REPUBLIC OF KOREA 19505/1999 05/28/1999
 REPUBLIC OF KOREA 19610/1999 05/29/1999
 REPUBLIC OF KOREA 23141/1999 06/19/1999
 REPUBLIC OF KOREA 23140/1999 06/19/1999
 REPUBLIC OF KOREA 23568/1999 06/22/1999
 REPUBLIC OF KOREA 23937/1999 06/24/1999
 REPUBLIC OF KOREA 26689/1999 07/02/1999
 REPUBLIC OF KOREA 99/8630 03/15/1999
 REPUBLIC OF KOREA 99/12856 04/12/1999
 REPUBLIC OF KOREA 99/12857 04/12/1999
 REPUBLIC OF KOREA 99/15722 04/30/1999
 REPUBLIC OF KOREA 99/19505 05/28/1999
 REPUBLIC OF KOREA 99/19506 05/28/1999
 REPUBLIC OF KOREA 99/19610 05/29/1999
 REPUBLIC OF KOREA 99/23140 06/19/1999
 REPUBLIC OF KOREA 99/34212 08/18/1999

IF REQUIRED, FOREIGN FILING LICENSE

GRANTED ** 05/17/2000

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY KOREA, REPUBLIC OF	SHEETS DRAWING 52	TOTAL CLAIMS 6	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature Initials				

ADDRESS

Daniel Y J Kim
Fleshner & Kim LLP
P O Box 221200
Chantilly ,VA 20153-1200

TITLE

Pilot signals for synchronization and/or channel estimation

**FILING FEE
RECEIVED
820**

FEES: Authority has been given in Paper
No. _____ to charge/credit DEPOSIT ACCOUNT
No. _____ for following:

- | |
|--|
| <input type="checkbox"/> All Fees |
| <input type="checkbox"/> 1.16 Fees (Filing) |
| <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |
| <input type="checkbox"/> 1.18 Fees (Issue) |
| <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Credit |